

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09576597	FILING DATE 5-22-00				
							APPLICANT(S) J. J. Voorhees					
							CLAIMS					
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			. C		. D		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	
1	/		/		/		51					
2		/		/		/	52					
3		/		/		/	53					
4		/		/		/	54					
5		/		/		/	55					
6		/		/		/	56					
7		/		/		/	57					
8		/		/		/	58					
9		/		/		/	59					
10	/		/		/		60					
11		/		/		/	61					
12		/		/		/	62					
13		/		/		/	63					
14		/		/		/	64					
15		/		/		/	65					
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17		/		/		/	67					
18		/		/		/	68					
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20			/		/		70					
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44					/		94					
45						/	95					
46						/	96					
47						/	97					
48						/	98					
49						/	99					
50						/	100					
TOTAL IND.	2		3		2		TOTAL IND.					
TOTAL DEP.	17		18		24		TOTAL DEP.					
TOTAL CLAIMS	19		21		26		TOTAL CLAIMS					